

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS			
FOR	NUMBER FILED	NUMBER EXTRA	
TOTAL CHARGEABLE CLAIMS	MINUS 20+		
INDEPENDENT CLAIMS	MINUS 3+		
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		REMAINING AFTER AMENDMENT		
	Total	7	Minus	20
	Independent	2	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	FEES	RATE	FEES
BASIC FEE	370.00	BASIC FEE	740.00
OR		OR	
X\$ 9		X\$ 18	
OR		OR	
X42		X84	
OR		OR	
+140		+280	
OR		OR	
1074		1072	

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9		X\$ 18	
OR		OR	
X42		X84	
OR		OR	
+140		+280	
OR		OR	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		REMAINING AFTER AMENDMENT		
	Total	7	Minus	20
	Independent	2	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE		ADDITIONAL FEE	
X\$ 9		X\$ 18	
OR		OR	
X42		X84	
OR		OR	
+140		+280	
OR		OR	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT C		CLAIMS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		REMAINING AFTER AMENDMENT		
	Total	11	Minus	20
	Independent	2	Minus	4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

RATE		ADDITIONAL FEE	
X\$ 9		X\$ 18	
OR		OR	
X42		X84	
OR		OR	
+140		+280	
OR		OR	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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